

Facility Reservation Request Form

NAME/ORGANIZATION	DATE OF BIRTH
ADDRESS	E-MAIL ADDRESS
PHONE NUMBER	CELL PHONE NUMBER

Event Description

FACILITY/ AMENITY REQUESTED	
PURPOSE OF EVENT	
IS THERE AN ADMISSION FEE? ____ No ____ Yes (Amount: \$ _____)	ESTIMATED ATTENDANCE

Usage Times

DATE (S)	START TIME	END TIME
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Facility	Rental Rate	Franklin City Resident Discount Rate
Active Adult Center	\$85/Day + Tax	
Beeson Hall: Mon.-Thurs.	\$175/5 Hrs. + Tax	
Beeson Hall: Fri.-Sun.	\$450/5 Hrs. + Tax	
Beeson Hall Additional Hour	\$100/Add. Hr. + Tax	
Beeson Hall Add. Supervisor	\$20/Hour	
CARC-Arts & Craft Room	\$20/Hour + Tax	
CARC-Arvin Room	\$35/Hour + Tax	
CARC-Theater	\$55/Hour + Tax	
CARC-Gymnasium	\$30/Hour + Tax	
CARC-After Hours Supervisor	\$15/Hour	
CARC-Racquetball Court	FREE or \$10 for Non-Members	
Palmer Park Community Center	\$70/Day + Tax	
Parks-Blue Heron Shelter (<i>largest shelter</i>)	\$75/Day + Tax	
Parks-Large Park Shelter	\$50/Day + Tax	
Parks-Small Park Shelter	\$25/Day + Tax	
Parks-Picnic Site	\$20/Day + Tax	
Parks-Gazebo	\$60/Day + Tax	
Parks-Rose Garden	\$60/Day + Tax	
Pool-Additional Lifeguard	\$30/Lifeguard	
Pool-Zero Depth Pool	\$100/Hour + Tax (<i>min. 2 hours</i>)	
Pool-Main Pool & Waterslide	\$140/Hour + Tax (<i>min. 2 hours</i>)	
Pool-Both Pools	\$175/Hour + Tax (<i>min. 2 hours</i>)	
Scott Park Diamond	\$20/Hour + Tax	
Scott Park Prepped Diamond	\$30/Hour + Tax	
Scott Park Complex	\$500/Day + Tax	
Sports Lighting	\$25/Hour	
Wonder Five Center Gymnasium	\$30/Hour + Tax	
Wonder Five Center Facility	\$500/Day + Tax	

Please turn sheet over. Waiver must be signed and dated on the back.

NOTE: A 7% sales tax will be added to the cost of each facility reserved.

Additional Requests or Comments

It is understood that no person, group, or organization has any vested right to the exclusive use of park property. The use of any/all park property is subject to availability and approval by the Franklin Parks & Recreation Department (the "Department"), subject to the policies, rules, and guidelines of the Franklin Parks & Recreation Board (the "Rules"). Renter agrees that no alcohol or tobacco products will be at the park facility. All payments, requests, and paperwork related to it must be received by the Department before the requested usage date. It is understood that Department-sponsored activities have priority over all other activities in using park facilities and this permit is subject to cancellation in the event of an emergency. Renter(s) agrees that reservation payments are not refundable if the event is cancelled by Renter(s).

If a facility rental permit is granted, the renter(s) agrees to be responsible for any accidents or injuries sustained by any person attending or participating in programs at park facilities, and to be responsible for replacement in case any damage or loss is incurred. The renter(s) agrees that they shall be held fully and solely responsible for any and all damages and/or missing equipment or effects park property incurred during their event. **Tape, staples, glue, tacks, etc. are not allowed to be used at any rental facility. Use of tape, staples, glue, tacks, etc. will result in a \$100.00 fee to repair damage.** Renter(s) further agrees that Board shall have fifteen (15) days from the date of the event to forward to the Renter(s) any applicable damage estimate. A certificate of insurance naming the Franklin Parks & Recreation Board, Franklin Parks & Recreation Department, and City of Franklin as additional insured may be required.

For Palmer Park & Active Adult Center renters: Renter(s) will be required to pick up a key at the Department front desk the prior Friday or Saturday of their rental. A \$10.00 replacement fee will be charged to renter(s) for any lost key.

All users agree to adhere to the Rules, applicable federal, state, and local laws, and any specific guidelines outlined by the Department. The undersigned hereby acknowledge receipt of the Rules.

I have read the Terms and Conditions and Park Rules and, as representative of the group making this request, I do agree to abide by these rules.

Signature of Authorized Representative of Group

Date

Printed Name of Authorized Representative of Group

DEPARTMENT USE ONLY

_____ This request has been approved and granted as requested.

_____ The request has been approved subject to certain other conditions as set forth below:

RENTAL FEE	OTHER FEES	DEPOSIT	APPROVED BY	DATE

_____ This request cannot be granted for the following reason(s):

DENIED BY	DATE